## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10079984

		CLAIMS AS	(Column		SMALL ENTITY		OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS			7 6		(Column 2)		ſ	RATE	FEE	UN   <b>[</b>	RATE	FEE
· · · · · · · · · · · · · · · · · · ·			5/		NUMBER EXTRA		ŀ	BASIC FEE	370.00		BASIC FEE	740.00
FOR NUMBER FILED				NUMBR	HEATRA	ŀ		570.00	ОН		740.00	
TOTAL CHARGEABLE CLAIMS 5/minus 20=				us 20=	* 17		Į	X\$ 9=	/7(	OR	X\$18=	
INDEPENDENT CLAIMS				* /			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							Ì	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "						olumn 2	ı	TOTAL	559	OR	TOTAL	
	CI					OTHER	THAN					
CLAIMS AS A (Column 1)			(Column 2			(Column 3)		SMALLE	NTITY	OR_	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** -		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL A184	"		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		ŀ	+140=		OR	+280=	
								TOTAL			TOTAL	
					_,	10 1 A		ADDIT. FEE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS			imn 2) HEST	(Column 3)	1 1		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA	<u>.</u>	RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140			+280=	
			+140=		OR	TOTAL	-					
			ADDIT. FEE		OR	ADDIT. FEE						
_		(Column 1)			<u>ımn 2)</u>	(Column 3)				_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	]	X42=		1	X84=	
Z	FIRST PRESENTATION OF MULTIPLE DEPENDEN				NT CLAIN		]	7455		OR	<b></b>	<del> </del>
								+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

## NOTICE OF FEE DUE

DATE: 01-28-0C	<del></del>	٠ ٣
то: 10679984	<del></del>	ວ່
FROM: Office of Initial Patent Exam	mination	1868
SUBJECT: Fee Due		ň
APPLICATION NUMBER:		•
A fee is due for the attached document so Office for the following reason. Please of authorization to charge a deposit account charge the appropriate fee. If an authorization fee deficiency.	check the application for the appropr nt. If an authorization is present, plea	iate se
Insufficient fee by check		
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The suspended fee code: 197	amount - \$ 1 8	
Fee Due	amount = $\frac{\cancel{2}}{\cancel{4}}$	·
If you have any questions, please contact Eleanor Kurtz at 703-308-3642.	t Cynthia Streater at 703-306-5430 or	<u>-</u>
Terminal Operator		